

CLAIMS ONLY

Application Number

10821797

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1													
2			/				51						
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48				/			97						
49				/			98						
50				/			99						
Total Indep			3				Total Indep						
Total Depend			16				Total Depend						
Total Claims			19				Total Claims						